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**NOTICE OF FILING/CLAIM FEE(S) DUE**  
TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS  
FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: 09/072994

**Total Fee Calculation**

Fee Code	Total # Claims	Number Extra	X	Fee	Fee =	Total
	Sm./Lg.			Sm. Entity	Lg. Entity	
Basic Filing Fee	<u>201/101</u>					
Total Claims >20	<u>203/103</u>	<u>36</u>	-20 =	<u>16</u>	X	<u>790</u>
Independent Claims >3	<u>202/102</u>	<u>9</u>	-3 =	<u>6</u>	X	<u>352</u>
Mult. Dep Claim Present	<u>204/104</u>					<u>492</u>
Surcharge	<u>205/105</u>					
English Translation	<u>139</u>					<u>130</u>
<b><u>TOTAL FEE CALCULATION</u></b>						<u>1764</u>

Fees due upon filing the application:

Total Filing Fees Due = \$ 1764.00

Less Filing Fees Submitted - \$ 0

BALANCE DUE = \$ 1764.00

[Signature]  
Office of Initial Patent Examination

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

59/072994

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	36 minus 20 =	* 16
INDEPENDENT CLAIMS	9 minus 3 =	* 6
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## SMALL ENTITY TYPE ☒

OR

## OTHER THAN SMALL ENTITY

RATE	FEE
	395.00
x\$11=	176
x41=	246
+135=	
TOTAL	817

OR

RATE	FEE
	790.00
x\$22=	352
x82=	492
+270=	
TOTAL	1634

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 40	Minus	** 36	= 4
	Independent	* 10	Minus	*** 9	= 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

## SMALL ENTITY

OR

## OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
x\$11=	36.00
x41=	39.00
+135=	
TOTAL ADDIT. FEE	75.00

OR

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 40	Minus	** 40	=
	Independent	* 10	Minus	*** 10	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

## RATE

## ADDITIONAL FEE

OR

## RATE

## ADDITIONAL FEE

x\$11=	
x41=	
+135=	
TOTAL ADDIT. FEE	

OR

x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 17	Minus	**	=
	Independent	* 2	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

## RATE

## ADDITIONAL FEE

OR

## RATE

## ADDITIONAL FEE

x\$11=	
x41=	
+135=	
TOTAL ADDIT. FEE	

OR

x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.